### Case 06-13120-DWH Doc 3 Filed 11/27/06 Entered 11/28/06 14:22:38 Desc Main Document Page 1 of 6

Official Form 22A (Chapter 7) (10/06)

In re	Steven Reeves	
	Debtor(s)	According to the calculations required by this statement:
Case Number: (If known)		☐ The presumption arises.
		■ The presumption does not arise.
		(Check the box as directed in Parts I, III, and VI of this statement.)

## CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly, whose debts are primarily consumer debts. Joint debtors may complete one statement only.

Part I. EXCLUSION FOR DISABLED VETERANS

Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification.  VIII. Do not complete any of the remaining parts of this statement.									
1	□ Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disab 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as def I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).								
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	Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION								
		tal/filing status. Check the box that applies a		•		·	nent	t as directed.	
	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.								
	ь. 🛭	$oldsymbol{\mathbb{I}}$ Married, not filing jointly, with declaration of $:$	sepa	rate households. By	y c	hecking this box, debto	r de	clares under pen	alty of perjury: "My
2		spouse and I are legally separated under applic of evading the requirements of $\S$ 707(b)(2)(A) <b>3-11.</b>							
	_	Married, not filing jointly, without the declara ("Debtor's Income") and Column B ("Spou	ıse'	s Income") for Lir	ne	s 3-11.			
		Married, filing jointly. Complete both Colum		•		<del>, , , , , , , , , , , , , , , , , , , </del>	ous	se's Income") f	or Lines 3-11.
		gures must reflect average monthly income rece dar months prior to filing the bankruptcy case,						Column A	Column B
	filing.	. If the amount of monthly income varied durin	g th	e six months, you n				Debtor's	Spouse's
	mont	h total by six, and enter the result on the appro	pria	ite line.				Income	Income
3	Gros	s wages, salary, tips, bonuses, overtime, c	om	missions.			\$	2,137.82	\$
		me from the operation of a business, profe							
	enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero.  Do not include any part of the business expenses entered on Line b as a deduction in Part								
	v								
4		To		Debtor	Ļ	Spouse			
	a.	Gross receipts	\$	0.00	-				
	b.	Ordinary and necessary business expenses	\$	0.00	<u> </u>				
	c.	Business income		btract Line b from L		-	\$	0.00	\$
		s and other real property income. Subtract ppropriate column(s) of Line 5. Do not enter a							
		of the operating expenses entered on Line							
5				Debtor		Spouse			
	a.	Gross receipts	\$	0.00	_				
	b.	Ordinary and necessary operating expenses	\$	0.00					
	c.	Rent and other real property income	Su	btract Line b from L	.ine	e a	\$	0.00	\$
6	Inte	rest, dividends, and royalties.					\$	0.00	\$
7	Pens	sion and retirement income.					\$	0.00	\$
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child or spousal support. Do not include amounts paid by the debtor's spouse if Column B is completed.					the household spousal support. Do	\$	0.00	\$

9	Unemployment compensation. Enter the However, if you contend that unemployment benefit under the Social Security Act, do not but instead state the amount in the space be	compensation r	received by	you or your spo	use was a				
	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$	0.00	Spouse \$		\$	0.00	\$	
10	Income from all other sources. If necess include any benefits received under the Soc war crime, crime against humanity, or as a visource and amount.	cial Security Act	or payment	s received as a mestic terrorism	victim of a				
	a.	\$	Debtoi	\$	ouse			l	
	b.	\$		\$					
	Total and enter on Line 10					\$	0.00	\$	
11	Subtotal of Current Monthly Incom A, and, if Column B is completed, add Lines					\$	2,137.82	\$	
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add					¢			2 137 82

	Part III. APPLICATION OF § 707(b)(7) EXCLUSION				
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.				
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: MS b. Enter debtor's household size: 2	\$	36,950.00		
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.				
The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presum arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.					
	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this	statem	ent.		

#### Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)			
16	Enter the amount from Line 12.	\$	
17	<b>Marital adjustment.</b> If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. If you did not check box at Line 2.c, enter zero.	\$	
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$	

# Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2) Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).

20B	a. IRS Housing and Utilities Standards; mortgage/rental expense \$ b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 \$					
		t Line b from Line a.	\$			
21	<b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:					
22	Local Standards: transportation; vehicle operation/public transportation expense.  You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.  D D D 1 D 2 or more.  Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable					
	number of vehicles in the applicable Metropolitan Statistical Area or Census Region www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		\$			
23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  1					
	a. IRS Transportation Standards, Ownership Costs, First Car \$					
	Average Monthly Payment for any debts secured by Vehicle 1, b. as stated in Line 42 \$					
		Line b from Line a.	\$			
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42: subtract Line b from Line a and enter the result in					
	a. IRS Transportation Standards, Ownership Costs, Second Car \$					
	Average Monthly Payment for any debts secured by Vehicle 2, b. as stated in Line 42 \$					
		Line b from Line a.	\$			
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all					
26	Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions.					
27	Other Necessary Expenses: life insurance. Enter average monthly premiums that you actually pay for					

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28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 44.			\$	
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.			\$	
30	Other Necessary Expenses: childcare. Enter the average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. <b>Do not include other educational payments.</b>			\$	
31	Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance or health savings accounts listed in Line 34.			\$	
32	Other Necessary Expenses: telecommunication services. Enter the average monthly amount that you actually pay for telecommunication services other than your basic home telephone service - such as cell phones, pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.				
33	Total I	xpenses Allowed under IRS Standards	<b>s.</b> Enter the total of Lines 19 through 32.	\$	
Note: Do not include any expenses that you have listed in Lines 19-32					
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following				
	categori	es.	1		
34	a.	Health Insurance	\$		
	b.	Disability Insurance	\$		
	c.	Health Savings Account	\$		
			Total: Add Lines a, b and c	\$	
35	expense	s that you will continue to pay for the reasonable	chold or family members. Enter the actual monthly and necessary care and support of an elderly, chronically ill, r immediate family who is unable to pay for such expenses.	\$	
36	maintair		verage monthly expenses that you actually incurred to nce Prevention and Services Act or other applicable federal confidential by the court.	\$	
37	Home energy costs. Enter the average monthly amount, in excess of the allowance in the IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.			\$	
38	Education expenses for dependent children less than 18. Enter the average monthly expenses that				
39	expense percent bankrup	s exceed the combined allowances for food and a of those combined allowances. (This information i	ne average monthly amount by which your food and clothing pparel in the IRS National Standards, not to exceed five is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the ee with documentation demonstrating that the sary.	\$	

Continued charitable contributions. Enter the amount that you will continue to contribute in the form of

Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40

cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).

40

41

			Subpart C: Deductions for D	ebt Payment		
42	you o Paym 60 m	wn, list the name of the cred ent. The Average Monthly Pa onths following the filing of th	ed claims. For each of your debts that is itor, identify the property securing the debyment is the total of all amounts contractue bankruptcy case, divided by 60. Mortgate mortgage. If necessary, list additional e	t, and state the Average Monthly ally due to each Secured Creditor in th ge debts should include payments of		
	a.	Name of Creditor	Property Securing the Debt	\$ Total: Add Line		
Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.						
		Name of Creditor	Property Securing the Debt	1/60th of the Cure Amou	nt	
	a.			\$ Total: Add Line	es \$	
44		ments on priority claim ny claims), divided by 60.	<b>s.</b> Enter the total amount of all priority cla	ims (including priority child support ar	nd \$	
			<b>expenses.</b> If you are eligible to file a cast in line a by the amount in line b, and en		se.	
	a.	Projected average monthl	y Chapter 13 plan payment.	\$	¬	
45	b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)			x		
				Total: Multiply Lines a and b	<b>⊣</b> ।	
	C.		rative expense of Chapter 13 case	Total. Multiply Lines a and b	\$	
46	-	Average monthly administ	rative expense of Chapter 13 case  Payment. Enter the total of Lines 42 thro		·	
46	-	Average monthly administ	·	ough 45.	\$ 	

	Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION				
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))	\$			
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))	\$			
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.	\$			
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.	\$			

	Initial presumption determination. Check the applicable box and proceed as directed.				
	☐ <b>The amount on Line 51 is less than \$6,000.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.				
52	☐ The amount set forth on Line 51 is more than \$10,000. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.				
	☐ The amount on Line 51 is at least \$6,000, but not more than \$10,000. Complete the remainder through 55).	of Part VI (Lines 53			
53	Enter the amount of your total non-priority unsecured debt	\$			
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$			
	Secondary presumption determination. Check the applicable box and proceed as directed.				
55	☐ <b>The amount on Line 51 is less than the amount on Line 54.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.				
55	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.				

#### Part VII. ADDITIONAL EXPENSE CLAIMS Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. Expense Description 56 Monthly Amount b. \$ Total: Add Lines a, b, c, and d

	Part VIII. VERIFICATION					
57	I declare under penalt must sign.) Date:	y of perjury that the information pro  November 27, 2006		/s/ Steven Reeves Steven Reeves (Debtor)		